

प्रशासन  
UT Administration of  
संघ शासित प्रदेश दादरा एवं नगर हवेली  
Dadra & Nagar Haveli  
(शिक्षा निदेशालय)  
(Directorate of Education)  
सिलवासा - ३९६२३०  
Silvassa - 396 230



F.No.DOE/GNL/PMS/ST/2018-19/5815

Date: 06/08/2018

**NOTICE FOR INVITING APPLICATION**  
**POST MATRIC SCHOLARSHIP FOR ST (SCHEDULED TRIBE)**

The Director of Education, Dadra & Nagar Haveli, Silvassa invites Post Matric Scholarship application (off-line) for the Academic Year 2018-19 from the students belonging to Scheduled Tribe (ST) having domicile of the UT of Dadra & Nagar Haveli studying at post matriculation or post-higher secondary stage to enable them to complete their higher education.

The eligible students may download and print-out the application form from the official website of the Administration of Dadra & Nagar Haveli [www.dnh.nic.in](http://www.dnh.nic.in) or [www.rmsadnh.webs.com](http://www.rmsadnh.webs.com) and submit their duly filled application by Registered Post/Speed Post /By hand along with all the mandatory documents to the following address on or before 15/09/2018. (Applicants submitting their application form by hand should visit office between 3p.m. to 5p.m.)

**Please Note : No application forms will be accepted after the due date under any circumstances.**

Directorate of Education,  
1<sup>st</sup> Floor, Block - 5,  
PWD Complex,  
Dadra & Nagar Haveli,  
Silvassa.

Sd/-  
Director of Education  
e-mail : doe-dnh@nic.in  
Ph.No. : 0260-2642098

प्रशासन  
संघ शासित प्रदेश दादरा एवं नगर हवेली  
(शिक्षा निदेशालय)  
सिलवासा – 396 230



F.No.DOE/GNL/PMS/ST/2018-19 / 5815

दिनांक: 06 /08/2018

### आवेदन निमंत्रण की सूचना

निदेशक (शिक्षा), दादरा एवं नगर हवेली , सिलवासा द्वारा दादरा एवं नगर हवेली , संघ प्रदेश के अनुसूचित जनजाति (ST) डोमिसाइल धारक छात्र /छात्राओं से शैक्षणिक वर्ष 2018-19 के लिए उनकी उच्च शिक्षा (पोस्ट मैट्रिक या पोस्ट हायर सेकंडरी) पूरी करने के हेतु पोस्ट मैट्रिक छात्र वृत्ति आवेदन (ऑफलाइन) आमंत्रित किया जाता है।

योग्य छात्र /छात्राएं दादरा एवं नगर हवेली प्रशासन की आधिकारिक वेबसाइट [www.dnh.nic.in](http://www.dnh.nic.in) या [www.rmsadnh.webs.com](http://www.rmsadnh.webs.com) से आवेदन पत्र को डाउनलोड कर प्रिंट कर सकते हैं और रजिस्टर्ड पोस्ट /स्पीड पोस्ट /प्रत्यक्ष रूप में अपने आवेदन को सभी आवश्यक दस्तावेजों के साथ दिनांक 15/09/2018 को या इससे पहले निम्नलिखित पते पर जमा कर सकते हैं। (प्रत्यक्ष रूप से आवेदन पत्र जमा करने का समय अपराह्न 3 से 5 है । )

**नोट :** किसी भी परिस्थिति में दिनांक 15/09/2018 के बाद आवेदन पत्र स्वीकार नहीं किये जायेंगे ।

शिक्षा निदेशालय,  
प्रथम तल, ब्लॉक -5,  
पीडब्ल्यूडी परिसर,  
दादरा और नगर हवेली,  
सिलवासा

Sd/-  
शिक्षा निदेशक  
e-mail : [doe-dnh@nic.in](mailto:doe-dnh@nic.in)  
Ph.No. 0260-2642098

વહીવટી તંત્ર,  
દાદરા અને નગર હવેલી (સં.પ્ર.)  
(શિક્ષણ નિયામકની કચેરી)  
સેલવાસ - 396230



F.No.DOE/GNL/PMS/ST/2018-19/5815

તારીખ: 06/08/2018

### અરજી આમંત્રણ સૂચના

શિક્ષણ નિયામક , દાદરા અને નગર હવેલી , સેલવાસ દ્વારા દાદરા અને નગર હવેલી કેન્દ્રશાસિત પ્રદેશના અનુસુચિત જન જાતિ ( ST) પરિવારના વિદ્યાર્થીઓ પાસેથી શૈક્ષણિક વર્ષ 2018-19 માટે તેમના પોસ્ટ મેટ્રીક્યુલેશન અથવા પોસ્ટ- હાયર સેકન્ડરી શિક્ષણને પૂર્ણ કરવા માટે પોસ્ટ મેટ્રિક શિષ્યવૃત્તિ અરજી (ઓફ-લાઇન) આમંત્રિત કરે છે.

પાત્રતા ધરાવતા વિદ્યાર્થીઓ દાદરા અને નગર હવેલી ની વહીવટી તંત્રની સત્તાવાર વેબસાઇટ [www.dnh.nic.in](http://www.dnh.nic.in) અથવા [www.rmsadnh.webs.com](http://www.rmsadnh.webs.com) પરથી આ અંગેના ફોર્મ ડાઉનલોડ કરી ને પ્રિન્ટ કરી શકે છે અને રજિસ્ટર્ડ પોસ્ટ /સ્પીડ પોસ્ટ / રૂબરૂમાં તારીખ 15/09/2018 ના રોજ અથવા તે પહેલાં નીચેના સરનામે જમા કરવાનાં રહેશે . (રૂબરૂ અરજી જમા કરાવવાનો સમય બપોરે 3 થી 5 રહેશે).

નોંધ : - કોઈ પણ પરિસ્થિતિમાં તારીખ 15/09/2018 પછી અરજીપત્ર સ્વીકારવામાં આવશે નહીં .

શિક્ષણ નિયામકની કચેરી,  
પ્રથમ માળ, બ્લોક -5,  
પી.ડબલ્યુ.ડી. કોમ્પ્લેક્સ,  
દાદરા અને નગર હવેલી,  
સેલવાસ- 396 230.

Sd/-  
શિક્ષણ નિયામક  
e-mail : [doe-dnh@nic.in](mailto:doe-dnh@nic.in)  
Ph.No. 0260-2642098

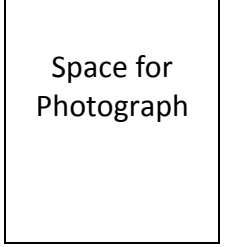
प्रशासन  
UT Administration of  
संघ शासित प्रदेश दादरा एवं नगर हवेली  
Dadra & Nagar Haveli  
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(Directorate of Education)  
सिलवासा - ३९६२३०  
Silvassa - 396 230



UT of D&NH Scheme of Post - Matric Scholarships to the students belonging to the Schedule Tribe of the Union Territory for the Academic Year 2018-19.

**APPLICATION FORM FOR THE POST MATRIC SCHOLARSHIPS  
TO SCHEDULED TRIBE (ST) STUDENTS**

(To be submitted to the Directorate of Education, Silvassa  
on or before **15.09.2018 between 3p.m. to 5p.m.**)



**PART - A**  
(To be filled in by the applicant )

Sr.No	Particulars	
1.	Name in full as mentioned in Bank Passbook attached. (Block Letters only)	
2.	Father's Name	
3.	Mother's Name	
4.	Nationality	INDIAN
5.	Caste/Tribe	ST
6.	Whether married or single	
7.	If married Husband's / Wife's Name	
8.	Full Address of the Applicant with Phone No.	
		Mob. No. :-
9.	<b>Whether applicant is employed :-</b>	
	1. Name of Employer (Firm)	
	2. Address of Employer	
	Ph.No.	
	3.Total monthly income including all allowances	
	4.Whether the applicant has to support a family or not.	
	5.Total annual income for year ending 31 <sup>st</sup> March 2018 from	

10.	Annual Income Details : (a+b+c+d = e)				
	(a)Applicant	(b)Father/ Hasband/Wife	(c) Mother	(d) Any Other Sources	(e) Total annual income for year ending 31 <sup>st</sup> March 2018
11.	(a) Father's Occupation				
	(b) Husband's/Wife's Occupation				
	(c) Mother's Occupation				
12.	(a)Name of the Guardian				
	(b)Relation with the Applicant				
	(c)Address of the Guardian				
	(d) Occupation of Guardian				
	(e) Total Annual Income for the year ending 31 <sup>st</sup> March 2018				
13.	Particulars of examination taken starting with matriculation (please attach attested copies of certificates / marks sheet).				
13.(a)	Name of Examination	Year in which passed	Whether passed or not. In case of Last exam. Passed , indicate percentage of marks and Division	Institution and University / Board	Remarks
	1	2	3	4	5
	S.S.C.				
	H.S.C.				
	F.Y. ( )				
	S.Y. ( )				
	T.Y. ( )				
13.(b)	Any break in educational career should be mentioned indicating what he /she were doing during this period).				
	Name of Examination last appeared before break	Year in which break taken		Activity during gap period	Remarks
		From	To		
	1	2	3	4	5
*Gap Certificate to be attached as per the period shown at 13.(b).					

14.	<b>Whether scholarship was availed under the Scheme or any other scheme in the previous year (2017-18) (If yes, then indicate the below details.) Certificate in Form 'B' is to be given.</b>	
	1. Name of the Scholarship Scheme	
	2. Course of study for which scholarship was given	
15.	<b>Course of study for which scholarship is now desired</b>	
	<b>Studying in I/II/III/IV/V - (Name of Course) in the AY year 2017-18</b>	
	<b>Date of joining of current session</b>	
16.	<b>If residing in the hostel of the institution or a any hostel</b>	
	Name and Address of Hostel	
	Date of joining Hostel in the Academic year 2018-19	
17.	Bank Details (copy to be enclosed) (Note : Bank Account to be compulsorily be seeded with Applicant's Aadhar Card)	
	Bank Name	
	Branch Name &	
	IFSC Code	
	Account Number	
	Aadhar Card No.	

**18. Documents to be attached:**

- I. Attested copy of Caste / Tribe Certificate.
- II. Attested copy of Parents Domicile.
- III. Attested copy of Parents Income Certificate (2017-18).
- IV. Attested copy of Service certificate / Pay Slip (if parents are Govt. Employees)
- V. Attested copies of Mark sheet.(Previous two years 2016-17, 2017-18)
- VI. Original Fees Receipt (Academic Year 2018-19).
- VII. Attested copy of Fee Structure of College .
- VIII. Part 'B' of the application form duly completed and signed by the Head of Institution.
- IX. Attested copy of Aadhar Card
- X. Copy of Bank Pass Book with IFSC Code. (Two Copy)(Adhar card seeded)

**Name & Signature of Applicant**

**Note:-**

➤ **Incomplete forms will be strictly rejected by Order.**

## DECLARATION

I hereby declare that I have read the regulations of the scheme and agree to abide by the terms and conditions of the award. I certify that the statements made in the application are correct and if any of the above information, is found incorrect by the authority of Scholarship, my application will stand rejected or I undertake to refund to the said authority the entire amount of scholarship through whichever means received by me or overpaid to me.

Date : \_\_\_\_\_

Place : \_\_\_\_\_

(b) Signature of Applicant

(b) Signature/ thumb impression of  
the Father /Guardians

(b) Signature/ thumb impression of  
the Mother /Guardians

**PART - B**  
**(To be filled in by the Head of Institution)**

1. Duration of the Course in which applicant is studying.
2. Compulsory fees excluding hostel rent and other incidental charges to be paid by the applicant to the Institution for the current year from \_\_\_\_\_ to \_\_\_\_\_ as per details given below.

Sr. No.	Particular of all non refundable compulsory fees payable by the applicant.	Amount actually paid by the applicant to the institution.			Remarks.
		1 <sup>st</sup> Term Rs.	IInd Term Rs.	Total Rs.	
	<b>Particulars</b>				
1.	Tuition Fees.				
2.	Examination Fees.				
3.	Games.				
4.	Library.				
5.	Medical.				
6.	Identity Card.				
7.	Practical Fee.				
8.	Enrolment Fee.				
9.	Laboratory Fee.				
10.	Subject wise extra fees, if any, such as Home Science, Geography.				
11.	Any other fees compulsory payable (to be mentioned item wise with amount)				
<b>TOTAL</b>					

3. If the applicant is residing in hostel, indicate, if he/she is entitled to free board and lodging free board/free Lodging \_\_\_\_\_.

4. Certified that:-

- i. Information given by the applicant in part - A has been checked and found correct/ has been corrected in red ink.
- ii. The courses in which the applicant is studying in this institution is a post metric one.
- iii. This institution is affiliated to \_\_\_\_\_ University/ Board and is recognized by the Government of India/State Gov. of \_\_\_\_\_ The applicant is studying in \_\_\_\_\_ course in the institution and the minimum qualification required for admission to that course is a pass in the \_\_\_\_\_ examination.

4. I undertake that the Scholarship amount in respect of the applicant is to be deposited in the account of the student for the specific purpose for which it is given and the information related to the applicant leaves the Institution or otherwise discontinues the studies or accepts any other regular scholarship / stipend, the fact will be immediately reported to the said authority and payment of Scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution on account of maintenance charges, fees etc. will also be refunded to the Government account.

**Signature of the Head of the Institution**

No. \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_\_

Name in capital letters \_\_\_\_\_

Designation \_\_\_\_\_

Address \_\_\_\_\_

(Seal of the Institution)



**ANNEXURE - I**  
**Caste and Income Certificate\*\*\***

a) This certificate should be signed by Mamlatdar, Dadra & Nagar Haveli.

b) This is a very important document as the scholarship is awarded mainly on the basis of this certificate. The issuing authority is therefore advised to issue this certificate with due caution.

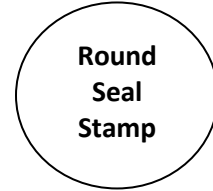
1. Certify that to the best of my knowledge Shri/ Kum / Smt \_\_\_\_\_ is a permanent resident of \_\_\_\_\_ ( indicate village &patelad)
2. Shri / Kum / Smt. \_\_\_\_\_ (Name of the Student) belongs to the caste / tribe \_\_\_\_\_ and sub-caste/Sub-tribe \_\_\_\_\_ His / Her religion \_\_\_\_\_
3. The total annual income from all sources of the students parent/guardian/ husband ( including the student's own earning, if any) of the last year ending 31<sup>st</sup> March 2018 was Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_)

\*\* Signature of the issuing authority

Full name in capital letters \_\_\_\_\_

Designation \_\_\_\_\_

Address ( in full )



- Certificate not bearing the seal of the issuing authority if that be a Gazetted Officer, will not be accepted. Others may also affix their seals, if available.
- Stamped signature will not be accepted.

**ANNEXURE - II**

**FORM OF DECLARATION OF INCOME**

**FORM (A)**

**( To be given by the parents/guardians when the student is not employed)**

Whereas my dependent son/daughter Shri/ Kum. / Smt. \_\_\_\_\_ Student of \_\_\_\_\_ College has applied for grant of scholarship. I, Shri \_\_\_\_\_ son of Shri \_\_\_\_\_ address \_\_\_\_\_

\_\_\_\_\_ declare that my total annual income from all sources in the preceding year ending 31<sup>st</sup> March 2018 is Rs. \_\_\_\_\_ as per details furnished below. I also affirm that particulars of property held by me are ( as per details furnished in the scheduled hereunder) and that I have correctly indicated the amount of various taxes, ceses and land revenue paid by me. I made myself personally responsible for the accuracy of the facts and figures furnished.

I further undertake that in the event of the particulars given in this declaration being found to be false, I shall refund, to the President of India the whole amount of the scholarship paid to the said \_\_\_\_\_ and the Government's decisions, whether the declaration of particular is false-shall be final and binding on me.

Place \_\_\_\_\_

Date \_\_\_\_\_

( Signature )  
Father / Guardian

\*\*\*

**FORM (B)**

**(To be given by the student who is employed)**

I, \_\_\_\_\_ son of \_\_\_\_\_ Address \_\_\_\_\_ student of \_\_\_\_\_

College, have applied for grant of a Scholarship, I hereby declare that my annual income and the annual income of others members or my family from all sources in the preceding year ending 31<sup>st</sup> March \_\_\_\_\_ is ` \_\_\_\_\_ as per details furnished below . I further declare that the particulars of property held by me ( and the other members of my family) are as shown below and that I have correctly indicated the amount of various taxes, cess, and land revenue paid by me/us. I am personally responsible for the accuracy of the facts and figures furnished.

2. (a) I have a family to support and it consist of \_\_\_\_\_ members.  
(b) I have no family to support.

3. I hereby declare and undertake that - in the event of the particulars given in this declaration being found to be false ( in respect of which the government decision shall be final and binding on my ). I shall refund to the President of India the whole amount of the scholarship paid to me.

Place \_\_\_\_\_

Date \_\_\_\_\_

( Signature )

---

**( Note :- certificate from the employer showing full details of pay D.P., DA, HRA., CLA, interim relief etc. be produced)**

## SCHEDULE - A

Sr.No.	Particulars	
1.	EXTENT OF LAND HELD (as owner/tenant)	
	• Area	
	• Village	
	• Survey No.	
	• Land revenue assessment	
2.	PROPERTY HELD (Houses, shop ,building ,housed sites etc.)	
	• House No.	
	• Street	
	• Village/Town City	
	• Area of site	
	• Rent derived, if any	
	• House tax paid	
	• Address of shop	
	• Nature of trade.	
	• Sales tax/Income tax paid	
	• Licence No.	
3.	SALARIES DRAWN	
	• Name of the Employer	
	• Office/Unit in which he/she working	
	• Address	
	• Monthly emoluments	
	• Other benefits like rent allowances etc	
4	OTHERS	
	• Income from subsidiary industries	
	• Amounts drawn as wages	
	• Any other income	

Place \_\_\_\_\_

Signature or left/right hand thumb  
Impression of parents, guardians

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

(N.B :- Mostly the income declaration will be verified by a reference to official records. As for example in the case of Government servants or those in private service, the reference to the Revenue Officer, in the case of persons paying income tax, reference may be made to Income Tax authorities. In the case of shopkeepers, reference may be made to sales tax figures, sales tax figures could in turn, assuming a normal profit of 10 percent to 15 % in case of retailers and 15 % to 20 % in the case of whole sale dealers for grains, etc. and houses, annual rental value can be easily known by a reference to house tax which is fixed on the basis of rental value. In the case of landless laborers , small holders, tenants of small size of lands held and extent of land cultivated as owner/tenant or both and /or a reference to land revenue records.)